Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

OMB No 1545-0047

Open to Public linspection

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements.

A	For the 2012 calen	dar year, or tax year beginning , 2012, and o	endina		
	Check if applicable	C , 2012, und	, <u>.</u>	D Employer Iden	tification Number
_				1	
	Address change	AFT GUILD SDCCD C.O.P.E.		91-2089	
	Name change	330 ENCINITAS BLVD #101		E Telephone num	
	Initial return	ENCINITAS, CA 92024		(760) 6	32-3600
	Terminated				
	Amended return			G Gross receipts	\$ 562,912.
	Application pending	F Name and address of principal officer	H(a) Is this	a group return for aff	
			H(b) Are al	l affiliates included? ' attach a list (see in:	
	Tax-exempt status	501(c)(3) 501(c) () (Insert no.) 4947(a)(1) or X 5	If 'No,	'attach a list (see in:	structions)
÷		_ 			• 0707
-		W.AFTGUILD.ORG		exemption number	
K	Form of organization		Formation 196	9 M State of	legal domicile CA
P	artil Summar	у			<u> </u>
	1 Briefly descri	be the organization's mission or most significant activities: THE A	<u>MERICAN E</u>	EDERATION	OF TEACHERS
ė	GUILD IS	<u> AN OPEN, ACTIVE, VITAL, MEMBER-DRIVEN ORGA</u>	<u> MIZATION</u>	<u>SERVING</u> C	<u>OLLEGE AND</u>
Activities & Governance	<u>CONTINUI</u>	NG EDUCATION FACULTY, CLASSIFIED STAFF, ANI	<u> MILITAR</u>	Y EDUCATIO	N INSTRUCTORS _
2	<u>IN THE S</u>	AN DIEGO COMMUNITY COLLEGE DISTRICT, THE CO	<u> DLLEGE_FA</u>	CULTY OF T	<u>HE</u>
Š	2 Check this bo	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	of more than 2	25% of its net as	ssets
ر د	3 Number of vo	oting members of the governing body (Part VI, line 1a)		3	64
ώ 90	4 Number of in	dependent voting members of the governing body (Part VI, line 1b)		4	64
itie	5 Total number	of individuals employed in calendar year 2012 (Part V, line 2a)		5	0
į	6 Total number	of volunteers (estimate if necessary)		6	0
¥	·)	ed business revenue from Part VIII, column (C), line 12.		7 a	0.
	b Net unrelated	business taxable income from Form 990-T, line 34		7 b	0.
			F	Prior Year	Current Year
•		and grants (Part VIII, line.1h).		210, 741.	562,912.
Revenue	9 Program serv	rice revenue (Part VIII, line 2g)			<u> </u>
Š	10 Investment in	ncome (Part VIII, column (A), lines 3, 4, and 7d).			
æ	11 Other revenu	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
	12 Total revenue	e – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	210,741.	562,912.
		imilar amounts paid (Part IX, column (A), lines 1-3)		11,700.	109,472.
		to or for members (Part VX, column (A), line 4)		11,700.	100, 172.
	15 Salaries, other	er compensation, employee benefits (Part IX, column (A), lines 5-10	, 		
စ	15 Salaries, other		'		
ŠUŠ	16a Professional	fundraising fees (Part IX, column (A)) Ine 11e)			
Expenses	b Total fundrais	sing expenses (Rait 1X, column (D) line 25)	, ,		
ŭ	I I/ Other expens	ses (Part IX, column (A), lines 11a-114d 11f-24e)		2,525.	890,344.
	18 Total expens	es Add lines 3.17 (must equal Part IX, column (A), line 25)		14,225.	999,816.
	19 Revenue less	expenses Subtract line 18 from line 12	· 	196,516.	-436,904.
8	ē	expenses outstact fine to non-fine-rz			
Net Assets Find Balanc	20 Total accets	(Part V. June 16)	веділпі	ng of Current Year	End of Year
Ass	20 Total assets	(Part X, line 16)		432,301.	23,246.
<u> </u>	21 Total liabilitie	s (Part X, line 26)		0.	27,849.
<u></u>	22 Net assets or	fund balances Subtract line 21 from line 20		432,301.	-4,603.
Pa	art II Signatur	e Block			
	ler penalties of perjury, I denplete Declaration of prepa		and to the best of n	ny knowledge and bel	ief, it is true, correct, and
com	plete Declaration of prepa	etere that I have exactined this return, incliding accompanying schedules and statements, a yer (other than thous) is passed obtain information of which preparer has any knowledge		11/22	12
		IN WOOD IN SO IN S	V	7 112011	
Esi	Signatu	e of officer	Da	ate /	
د. ا	- 1.	CY HALEY	עסבא	SURER	
67		print name and title	INDA	SUKEK	
-			20 20	III .	PTIN
·		JUI	2920	∏eft-tck ∐ıf	
S pa		JREINCE SCOTT JR.		self-employed	P00163942
	eparer Firm's name	SCOTT & CRONIN ELP/			
4	se Only Firm's addre	ess 330 ENCINITAS BOULEVARD #101		Firm's EIN ► 33	-0749329
Щ		ENCINITAS, CA 92024-3723		Phone no (76	
S Ma	y the IRS discuss th	is return with the preparer shown above? (see instructions)		, ,,,	X Yes No
		Reduction Act Notice, see the separate instructions.	TEEA0113L 12	2/18/12	Form 990 (2012)
\mathbf{c}	epointoin i	The state of the s			. 51111 550 (2012)
(V)					

Form 990 (2012) AFT GUILD		91-2089978 Page 2
	ram Service Accomplishments	
	ontains a response to any question in this Part III	<u>X</u>
1 Briefly describe the organizati SEE SCHEDULE O	on's mission:	
PEF PCHEDOFF O		
2 Did the organization undertake a	any significant program services during the year which were not list	ed on the prior
Form 990 or 990-EZ? .		Yes X No
If 'Yes,' describe these new so		
	nducting, or make significant changes in how it conducts, any	program services? Yes X No
If 'Yes,' describe these change		
Section 501(c)(3) and 501(c)(4)	ogram service accomplishments for each of its three largest p organizations and section 4947(a)(1) trusts are required to report to d revenue, if any, for each program service reported	rogram services, as measured by expenses. he amount of grants and allocations to
4a (Code) (Expense		
	ATION OF TEACHERS GUILD, LOCAL 1931, CF	T/AFT, AFL- CIO, IS AN OPEN,
	BER-DRIVEN ORGANIZATION SERVING COLLEGE	
	D STAFF, AND MILITARY EDUCATION INSTRUC	
	DISTRICT, THE COLLEGE FACULTY OF THE GR	
COLLEGE DISTRICT, A	AND MILITARY EDUCATION INSTRUCTORS OF F	LORIDA STATE COLLEGE.
4 b (Code) (Expense	es \$ including grants of \$) (Revenue \$)
4 c (Code) (Expense	es \$ including grants of \$) (Payanya ¢
46 (Code) (Expense	including grants of \$) (Revenue \$)
- -		
4 d Other program services (Desc	cribe in Schedule O)	
(Expenses \$	The state of the s	Revenue \$)
4 e Total program service expens		Form 990 (2012)
₩r 1r1	TEEA0102L 08/08/12	101111 330 (2012)

Form 990 (2012) AFT GUILD SDCCD C.O.P.E.

Part Checklist of Required Schedules

-			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3	X	
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		***	
ā	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a		X
t	Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		X
	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		X
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		X
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		<u> X</u>
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	ı	<u> </u>
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		<u> </u>
	o Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
-	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u>
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
ł	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20 a	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
ŀ	of 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II X 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III X 22 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete X Schedule 1 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No, 'go to line 25 Х 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a b is the organization aware that it engaged in an excess benefit transaction with a disgualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L. Part I 25b Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II 26 Х Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III 27 Х 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV X 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28h Х c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an X officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M X 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 X Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II Х 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I X 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, Х and V. line 1 34 X 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI Х 37

Note. All Form 990 filers are required to complete Schedule O

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Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197

aı	Check if Schedule O contains a response to any question in this Part V				
	Oncor in Ochequie O contains a response to any question in this Fart v		•	Yes	No
1 -	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a (162	110
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b (73 · · ·
	Did the organization comply with backup withholding rules for reportable payments to vendors and r		1	1	Arge j
(; Did the organization comply with backup withholding rules for reportable payments to vendors and r (gambling) winnings to prize winners?	eportable garrifig	1 c		
2:	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-				7.55
~ .	ments, filed for the calendar year ending with or within the year covered by this return	2a (
k	If at least one is reported on line 2a, did the organization file all required federal employmen	nt tax returns?	2 b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see in	nstructions)	× K	16	1
3 a	a Did the organization have unrelated business gross income of \$1,000 or more during the year	ar?	3a		X
ŀ	olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	•	3 b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other	er authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other f	inancial account)?	4 a		X
t	olf 'Yes,' enter the name of the foreign country:				
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and F			Service of the servic	Same
	f a Was the organization a party to a prohibited tax shelter transaction at any time during the ta	-	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shell	ter transaction?	5 b		Х
(: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, a	ind did the organization			١.,
	solicit any contributions that were not tax deductible as charitable contributions?		6 a		X
ŀ	o If 'Yes,' did the organization include with every solicitation an express statement that such contribut not tax deductible?	ions or gifts were	6		
7			6 b	M.JED	a.com.
	Organizations that may receive deductible contributions under section 170(c).				
ä	a Did the organization receive a payment in excess of \$75 made partly as a contribution and payor?	partly for goods and	7.	- EIST	()// 4 .
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 a		
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it is		/ 0		
•	Form 8282?	vas required to life	7 c		
(If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d	-39	40	2522
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal	benefit contract?	7 e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal ber	nefit contract?	7 f		
ç	If the organization received a contribution of qualified intellectual property, did the organization file	Form 8899			
	as required?		7 g		
ŀ	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	e organization file a	7.		
	Form 1098-C7		7 h	ž.	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, or a donor advised fund maintained by a sponsoring organization, h	ng organizations. Did the	<u>: :</u>	Ž : 31	Lis_
	holdings at any time during the year?	lave excess business	8		
9	Sponsoring organizations maintaining donor advised funds.		\$40	3 3 1 7	(38%
	a Did the organization make any taxable distributions under section 4966?		9a		
ŧ	Did the organization make a distribution to a donor, donor advisor, or related person?		9 b		
10	Section 501(c)(7) organizations. Enter				.:
a	Initiation fees and capital contributions included on Part VIII, line 12	10 a			` .
ŀ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b	1 7	۰	jar 7
11	Section 501(c)(12) organizations. Enter	<u> </u>	1		و ماجيد
ā	Gross income from members or shareholders	11 a	ŝ	,	2.5
ŀ	Gross income from other sources (Do not net amounts due or paid to other sources		1		7.
	against amounts due or received from them)	11 b		^- 	_ نشد
	a Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu		12 a		
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12 b		Ł	,
	Section 501(c)(29) qualified nonprofit health insurance issuers.		13		182
ā	a is the organization licensed to issue qualified health plans in more than one state?		13 a	y,	ļ
	Note. See the instructions for additional information the organization must report on Schedu	le O			
ŀ	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	1126		'	^
		13b	4	śs.	
	Enter the amount of reserves on hand	13 c	14-	9	X
	a Did the organization receive any payments for indoor tanning services during the tax year?	Sahadula O	14a		_^
1	olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in	Scriedule O	14b	1	l

Form 990 (2012) AFT GUILD SDCCD C.O.P.E. Page 6 91-2089978 Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI X Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 64 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 1 b 64 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? X 5 Did the organization have members or stockholders? 6 Х 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7 a Х **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b Х stockholders, or other persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 a X **b** Each committee with authority to act on behalf of the governing body? 8 b Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No Х 10 a Did the organization have local chapters, branches, or affiliates? 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b Х 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a Х b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12 b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 120 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15 a 15 b **b** Other officers of key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply |X| Upon request Own website Another's website Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to

SEE SCHEDULE O

the public during the tax year

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

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Form 990 (2012)	AFT	GIITLD	SDCCD	$C \cdot O$. P. I	₹.

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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees; officers; key employees; highest compensated employees; and former such persons.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

Check this box if heither the organization h	T any reia	teu org	Jai 112			inpens	salet	any current officer, di	rector, or trustee	<u> </u>	
			(C)								
(A) Name and Title	(B) Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee)					h an e)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation	
	hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations	
_(1)_SEE_ATTACHED_LIST	0										
(O) TTV VALUED	0							0.	0.	0.	
PRESIDENT	$-\frac{40}{0}$	Х	-	х				0.	· · · · · · · · · · · · · · · · · · ·		
(3) LOU ANN GIBSON	8	_^_		^				0.	0.	0.	
TREASURER	0	х		х				0.	0.	0.	
(4) BERTA HARRIS	1	**							0.	<u> </u>	
SECRETARY	0	Х		Х				0.	0.	0.	
(5)											
(6)											
(9)											
(10)										-	
(11)									"		
(12)										·-	
(13)											
(14)											

Partivil Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (cont)											
	(B)			((-						
(A) Name and title	Average hours per	(do box offi	not o , unle	Pos theck ss pe ad a o	sition more erson direct	than is both or/trust	one n an tee)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other	bor
	week (list any hours		_					the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the	on
	for related	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	mer			organizatio and related organization	d
	organiza - tions	र्घ इ	쿒) Oge	e				Organization	15
	dotted line)	stee	uste		l°	ensa				-	
			``			[E					
(15)	(15)										
(16)											
(17)					-						
(18)		-									
(19)					_				· · · · · · · · · · · · · · · · · · ·		
(20)											
(21)											
(22)					ļ						
(23)											
(24)		 				-		-			
(25)					ļ						
1 b Sub-total		ļ					>	0.	0.		0.
c Total from continuation sheets to Part VII, Section	1 A						>	0.	0.		0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to	those li	sted	abo	ve) v	who	receiv	ved	0. more than \$100,00	0 .0 of reportable com	pensation	0.
from the organization • 0										l v	
3 Did the organization list any former officer, directo on line 1a? If 'Yes,' complete Schedule J for such	r or trus	stee,	key	em	ploy	ee, c	or hi	ighest compensat	ed employee	Yes	No X
For any individual listed on line 1a, is the sum of rethe organization and related organizations greater	eportab	le co	mpe	ensa If ')	ition 'es'	and comi	oth plet	er compensation e Schedule J for	from		
such individual 5. Did any person listed on line 1a receive or accrue	compen	satio	n fr	٥m	anv	unre	late	d organization or	ındıvıdual	4	X
for services rendered to the organization? If 'Yes,' Section B. Independent Contractors	comple	te So	chec	lule	J fo	rsuc	h p	erson		5	X
Complete this table for your five highest compensation from the organization. Report compensation from the organization.	ated inde	epen the c	den alen	t co	ntra year	ctors endii	tha	it received more to	han \$100,000 of ganization's tax yea	ar	
(A) Name and business address (B) Description of services Compensation											
				<u></u>		-					
2 Total number of independent contractors (including bu \$100,000 in compensation from the organization ▶		ited to	o the	se l	isted	abo	ve)	ı who received more	than		
ψτου,ουσ in compensation from the organization	U									7. PROMPTOWN	

369 W.	Check if Schedule O contains a response to any question in this Part VIII.							
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns. b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above. g Noncash contributions included in lns 1a-1f: h Total. Add lines 1a-1f.	650. 650.	562,912.					
픻		ess Code	362,912.					
PROGRAM SERVICE REVENUE	b c d e f All other program service revenue g Total. Add lines 2a-2f	-	and the state of t					
	3 Investment income (including dividends, intereother similar amounts) 4 Income from investment of tax-exempt bond p 5 Royalties (i) Real (ii)	>	, , , , , , , , , , , , , , , , , , , ,	→ { b				
	b Less rental expenses c Rental income or (loss) d Net rental income or (loss)	•						
	7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)	(ii) Other						
OTHER REVENUE	8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses b c Net income or (loss) from fundraising events	-	Company of the compan	Comments of the comments of th	The state of the s			
	9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities	•				A Section of the sect		
	10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory	•		Constitution of the consti				
-		ness Code	Consider the second of the second	k.dd.d.k.1886 18	g 8 ,			
	d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions	•	562.912.	0				
ı	in india leactine, acc illustractions	-	1 302.917.	ı U.	, U.:!	1 ()		

Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must con			omplete column (A).	·-····································				
	Check if Schedule O contains a response to any question in this Part IX								
Do r 7b, 8	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	109,472.	109,472.	₹.					
2	Grants and other assistance to individuals in the United States. See Part IV, line 22								
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16								
4	Benefits paid to or for members.				Grani Acces				
5	Compensation of current officers, directors, trustees, and key employees.	0.	0.	0.	0.				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.				
7	Other salaries and wages								
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions).								
9	Other employee benefits.								
10	Payroll taxes								
11	Fees for services (non-employees)								
	Management								
	Legal								
	Accounting	15 100	11 242	3,781.					
	•	15,123.	11,342.	3,761.					
	Lobbying		Maria Sir Likera	14.30 XX 40.					
	Professional fundraising services See Part IV, line 17	· · · · · · · · · · · · · · · · · · ·	## : #:x : 1 1 4 5	10k - 47 - 45					
	Investment management fees -		-		- TJ / 1				
_	Other. (If line 11g amt exceeds 10% of line 25, col- umn (A) amt, list line 11g expenses on Sch 0) Advertising and promotion								
13	Office expenses.	2 502	1 077	COC					
	•	2,503.	1,877.	626.					
14	Information technology								
15	Royalties				-				
16	Occupancy								
17	Travel		· · · · · · · · · · · · · · · · · · ·						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials								
19	Conferences, conventions, and meetings								
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization								
23	Insurance								
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses								
	in line 24e If line 24e amount exceeds 10%		, , ,						
	of line 25, column (A) amount, list line 24e				()				
_	expenses on Schedule O)	077 000	, ,						
	INDEPENDENT EXPENDITURES	871,920.	871,920.						
	POLLING & SURVEY RESEARCH	500.	500.						
	MEETINGS & APPEARANCES	298.	298.						
C									
	All other expenses	<u> </u>							
25	Total functional expenses Add lines 1 through 24e	999,816.	995,409.	4,407.	0.				
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here if following SOP 98-2 (ASC 958-720)								

Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X (B) End of year (A) Beginning of year Cash - non-interest-bearing 432,301 23,246. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 10 a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a b Less: accumulated depreciation 10 b 10 c 11 Investments - publicly traded securities 11 Investments - other securities See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11 13 13 Intangible assets 14 14 15 Other assets See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 432,301 16 23,246 Accounts payable and accrued expenses 17 17 27,849 18 Grants payable 18 Deferred revenue 19 19 20 Tax-exempt bond liabilities. 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees. key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 25 26 Total liabilities. Add lines 17 through 25 0 26 849 Organizations that follow SFAS 117 (ASC 958), check here > X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 432,301 27 27 4,603 Temporarily restricted net assets 28 28 Permanently restricted net assets 29 õ Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 33 432,301 -4,603. Total liabilities and net assets/fund balances 34 34 23,<u>246.</u> 432,301 BAA Form 990 (2012)

TEEA0111L 01/03/13

Form 990 (2012) AFT GUILD SDCCD C.O.P.E.	1-2089978	; Pa	age 12
Part XI Reconciliation of Net Assets			
Check if Schedule O contains a response to any question in this Part XI			
1 Total revenue (must equal Part VIII, column (A), line 12)	1	562,	912.
2 Total expenses (must equal Part IX, column (A), line 25)	2	999,	
3 Revenue less expenses Subtract line 2 from line 1	3	-436,	904.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	432,	
5 Net unrealized gains (losses) on investments.	5		
6 Donated services and use of facilities .	6		
7 Investment expenses	7		
8 Prior period adjustments	8		
9 Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	-4,	603.
Part XII Financial Statements and Reporting			
Check if Schedule O contains a response to any question in this Part XII .			X
		Yes	No
1 Accounting method used to prepare the Form 990 Cash X Accrual Other SEE SCH. If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O 2 a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	X
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both.	wed on a		
Separate basis Consolidated basis Both consolidated and separate basis			
b Were the organization's financial statements audited by an independent accountant?		2 b X	
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both Separate basis X Consolidated basis Both consolidated and separate basis			
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the au review, or compilation of its financial statements and selection of an independent accountant?	dıt,	2c X	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?)	3 a	х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required a or audits, explain why in Schedule O and describe any steps taken to undergo such audits	iudit	3 b	
BAA		Form 990	(2012)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Schedule C (Form 990 or 990-EZ) 2012

Open to Public

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only.

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A. Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B Do not complete Part II-A

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III

_		- 3					
	of organization			Employer identific	ation number		
	GUILD SDCCD C.O.P			91-208997			
Pai		rganization is exempt under secti			zation.		
1		organization's direct and indirect political o	campaign activities in	711	E PART IV		
2	Political expenditures			► \$	108,522.		
3	Volunteer hours						
Par		rganization is exempt under secti					
1		ise tax incurred by the organization under		► \$			
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955	▶\$	<u> </u>		
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No		
4 a	Was a correction made?				Yes No		
t	If 'Yes,' describe in Part IV						
Par	t I-C Complete if the o	rganization is exempt under secti	on 501(c), excep	t section 501(c)(3)	•		
1	Enter the amount directly ex	pended by the filing organization for section	on 527 exempt function	n activities.			
2	Enter the amount of the filing of function activities	organization's funds contributed to other organ	nizations for section 527	'exempt ► \$	}		
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b						
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No		
5							
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-		
(1)							
(2)							
(3)							
(4)				~			
(5)							
(6)				-			

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

301Equie C (10111 330 01 330-EZ) 201				91-208	
Part II-A Complete if section 501(the organizatior (h)).	is exempt under se	ction 501(c)(3) a	nd filed Form 5768 (election under
A Check ► ☐ If the filin	ng organization belong	s to an affiliated group (and	list in Part IV each at	ffiliated group member's nar	ne,
address,	EIN, expenses, and	I share of excess lobbying	expenditures).		
B Check ► I If the filing	ng organization chec	cked box A and 'limited co	ntrol' provisions app	ly.	
(The term		ing Expenditures ns amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendit	ures to influence pul	olic opinion (grass roots lo	bbying)		
b Total lobbying expendit	ures to influence a le	egislative body (direct lobl	oying) .		
c Total lobbying expendit	ures (add lines 1a ai	nd 1b)			
d Other exempt purpose	expenditures				
e Total exempt purpose e	expenditures (add lin	es 1c and 1d)	• •		
f Lobbying nontaxable ar both columns	mount Enter the am	ount from the following ta	ble in		
If the amount on line 1e, col		The lobbying nontaxable	amount is:		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1		\$100,000 plus 15% of the excess			
Over \$1,000,000 but not over \$		\$175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$		\$225,000 plus 5% of the excess	over \$1,500,000.		
Over \$17,000,000		\$1,000,000			
g Grassroots nontaxable		<u>-</u>			
h Subtract line 1g from li					
i Subtract line 1f from lin	ne ic if zero or less,	enter -U-			
j If there is an amount other section 4911 tax for this		line 1h or line 1i, did the org	ganization file Form 47	720 reporting	Yes No
(Som		4-Year Averaging Period t t made a section 501(h) e) to complete all of the five	
·		s below. See the instructi			
	LODD	ying Expenditures During	4 rear Averaging P	rerioa	T
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2 a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					
ВАА				Schedule C (Forn	n 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012 AFT GUILD SDCCD C.O.P.E. 91-2089978

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each West representative to the second second as Book West and described	(a	1)	(b)
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities?			
i Total Add lines 1c through 1i		₩ ~ :	
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			79.855 S - 17.888 944
b If 'Yes,' enter the amount of any tax incurred under section 4912		, ,	
		*	
	.Ll.i		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	C)(5) 	, or	
• West a half whall will (00% as well). I are used to a solid will be to the			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			1
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			3
(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) Part West' (b) Part Yes.'	c)(5) art II	, or s I-A, i	section 501(c) ine 3, is
		1	
		'	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			
a Current year		2 a	
b Carryover from last year		2 b	
c Total		2 c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues.		3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4	
5 Taxable amount of lobbying and political expenditures (see instructions)		5	
Part IV Supplemental Information		1	
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information	rt II-A	(affili	ated group list),
PART I-A, LINE 1 - DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES	. _		
CASH CONTRIBUTIONS TO POLITICAL CAMPAIGNS AND CAMPAIGN ACTIVITIES	ĪŪC	:TūĎ:	ING LOCAL
COLLEGE BOARD RACES, LOCAL DEPARTMENT OF EDUCATION BOARD RACES, SU	UPPC	RT_	OF_LOCAL
ORGANIZATIONS AND STATE BOND ISSUES, AND SUPPORT OF CANDITATES WHO	<u>5_S</u> U	JP <u>PO</u> I	RT_EDUCATION
ISSUES.			

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions. OMB No 1545-0047

2012

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Employer identification number

AFT GUILD SDCCD C.O.P.E 91-2089978 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) Aggregate grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds No are the organization's property, subject to the organization's exclusive legal control? Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring No impermissible private benefit? Yes Partill Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2 2 b Total acreage restricted by conservation easements 2 b c Number of conservation easements on a certified historic structure-included-in-(a). 2 c 77034 d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic 2 d structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ►\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 ▶\$ (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

▶\$

▶\$

Schedule D (Form 990) 2012 AFT (91-208	9978	Page 2
Part Organizations Mainta	ining Collec	tions	of Art, Histo	orica	Treasures, c	or Other Similar Ass	sets (conti	nued)
3 Using the organization's acquisition items (check all that apply):	, accession, an	d other	records, check a	iny of	the following that a	are a significant use of its	collection	
a Public exhibition			d Loan	or exc	hange programs			
b Scholarly research			e Other					
c Preservation for future gener 4 Provide a description of the organize		ns and	explain how the	y furth	er the organization	's exempt purpose in		
Part XIII.During the year, did the organiza to be sold to raise funds rather the	tion solicit or r	eceive	donations of a	t, hist	orical treasures,	or other similar assets		Π.,
to be sold to raise funds rather the	nan to be main	itained	as part of the	organi	zation's collection	1?	Yes	No
Partive Escrow and Custodial Arrangement of the Particle	angements. C n Form 990.	Part	.e ii the organiz X. line 21.	auon	answered tes	o Form 990, Part IV, III	ie 9, or	
1 a Is the organization an agent, trus on Form 990, Part X?				for c	ontributions or of	her assets not included	────	No
b If 'Yes,' explain the arrangement	ın Part XIII ar	d com	plete the follow	ing tal	ole:	<u></u>	<u>. </u>	
December halance							Amount	
c Beginning balance						1 c		
 d Additions during the year e Distributions during the year 						1 d		
f Ending balance						16		
2a Did the organization include an a	mount on Forr	n 990.	Part X. line 21	,			Yes	No
b If 'Yes,' explain the arrangement			•		nas been provide	d in Part XIII	□ .03	H
						·		
Part V Endowment Funds. C								
1 D	(a) Current		(b) Prior ye	ar	(c) Two years	(d) Three years	(e) Four y	/ears
1 a Beginning of year balance	~							
b Contributions							-	
c Net investment earnings, gains, and losses								
d Grants or scholarships		·	· · · ›					
 Other expenditures for facilities and programs 	· · · · · · · · · · · · · · · · · · ·							
f Administrative expenses								
g End of year balance							<u> </u>	
2 Provide the estimated percentage		t year	end balance (lii	ne 1g,	column (a)) held	l as		
a Board designated or quasi-endowm			⁸					
b Permanent endowment	* · · · · · · · · · · · · · · · · · · ·		o,					
c Temporarily restricted endowmer The percentages in lines 2a, 2b,		equal.						
3a Are there endowment funds not in t		•		are hel	d and administere	d for the		
organization by (i) unrelated organizations							Yes	s No
(ii) related organizations							3a(i) 3a(ii)	
b If 'Yes' to 3a(ii), are the related of	organizations li	sted a	s required on S	chedu	le R?		3b	
4 Describe in Part XIII the intended	•		•				30	
Part VI Land, Buildings, and							•	
Description of property		(a) Cos	t or other basis	(b	Cost or other oasis (other)	(c) Accumulated depreciation	(d) Book	value
1 a Land								
b Buildings								
c Leasehold improvements		•						
d Equipment	Γ							
e Other								
Total. Add lines 1a through 1e (Colum	nn (d) must eq	ual For	m 990, Part X,	colum	n (B), line 10(c)			0.
BAA						Scheo	lule D (Form 9	990) 2012

Schedule D (Form 990) 2012 AFT GUILD SDCCD			91-20	89978	Page 3
Part VIII Investments - Other Securities. Se	ee Form 990, Part X, (b) Book value	line 12. N/A (c) Method (of valuation	Cost or	
(a) Description of security or category (including name of security)	(b) Book value	end-of-ye	ear market	value	
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other		<u> </u>			
(A)	_				
(B)	-				
(C)	-				
(<u>D)</u> (E)					
(F)	_				
<u>(G)</u>	_				
(H)	_				
(l)					
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)	>				
PartVIII Investments - Program Related. Se	e Form 990, Part X.				
(a) Description of investment type	(b) Book value	(c) Method of	f valuation	Cost or	
		end-of-ye	ear market	value	
(1)					
(2)					
(3)					
(4)					
(6)					
7)					
(8)					
(9)					
(10)					
Total. (Column (b) must equal Form 990, Part X, column (B) line 13)	•	Control of the Contro		° ्रकेट्टे	
PartilX Other Assets. See Form 990, Part X	, line 15. N/A				
	Description			(b) Bo	ok value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)	· · · · · · · · · · · · · · · · · · ·				
(7)		· · · · · · · · · · · · · · · · · · ·			
(8)	 			ļ	
(9) (10)					
Total. (Column (b) must equal Form 990, Part X, column	(R) line 15)		•		
Part X Other Liabilities. See Form 990, Part		··		L	
(a) Description of liability	(b) Book value				
(1) Federal income taxes	(2) 20011 741140		•		
(2)				ś	
(3)			2		
(4)			11	. 4 3	
(5)		<u> </u>	•		Ì
(6)					
(7)			4 B		. }
(8)		^ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	JF.	,	
(9)					× .
(10)			2.5	ž., .	* ,
(11)			. ,		
Total (Column (b) must equal Form 990, Part X, column (B) line 25.)	►				

^{2.} FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2012 AFT GUILD SDCCD C.O.P.E.		1-2089978 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statemen	ts With Revenue per R	eturn N/A
1 Total revenue, gains, and other support per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
a Net unrealized gains on investments	2 a	
b Donated services and use of facilities	2 b	5 1 <u></u>
c Recoveries of prior year grants.	2 c	7
d Other (Describe in Part XIII.)	2 d	7
e Add lines 2a through 2d		2 e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII.)	4b	1 : 1
c Add lines 4a and 4b .		4c
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5
Part XII Reconciliation of Expenses per Audited Financial Stateme	nts With Expenses per	Return N/A
Total expenses and losses per audited financial statements.		1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities	2 a	
b Prior year adjustments	2 b	1 *
c Other losses	2 c	1
d Other (Describe in Part XIII)	2 d	7
e Add lines 2a through 2d		2 e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1	
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a	_ <u> </u>
b Other (Describe in Part XIII)	4 b	
c Add lines 4a and 4b		4c
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5
Part XIII Supplemental Information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Paline 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also com	art III, lines Ia and 4, Part IV	/, lines 1b and 2b, Part V, y additional information.
		
BAA		Schedule D (Form 990) 2012
		•

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

1545-0047	12
OMB No	70

Employer identification number

91-2089978

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Partila General Information on Grants and Assistance

AFT GUILD SDCCD C.O.P.E.

Name of the organization

% □ X Yes

<u>Partilla</u> Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ALLIANCE OF CALIFORNIA FOR CO = 642 THIRD AVE, SUITE M CHULA VISTA, CA 91910	27-1482731		21,000.	0			POLITICAL ACTIVITIES
(2) BERNIE RHINERSON	45-2725994		5,050.	.0			POLITICAL ACTIVITIES
(3) DR. WEBER FOR ASSEMBLY 2012 6927 NGRTH AVE = 6927 NGRTH AVE = = = = = = = _	46-1663129		7,800.	.0			POLITICAL ACTIVITIES
(4) SAN DIEGANS FOR BOB FILNER FO 4305 UNIVERSITY AVE., #340 SAN DIEGO, CA 92105	46-0783528		42,000.	0.			POLITICAL ACTIVITIES
(5) SAN DIEGO DEMOCRATIC PARTY	95-3753579		25,000.	0.			POLITICAL ACTIVITIES
			i de la companya de l				
\overline{a}							
(8)							
!							
2 Enter total number of section 501(c)(3) and government organizatior3 Enter total number of other organizations listed in the line 1 table) and government or ons listed in the line	ē.	s listed in the line 1 table			A A	5
BAA For Paperwork Reduction Act Notice, see the Instructions for Form	see the Instructions	for Form 990.)	TEEA3901L 11/30/12	11/30/12	Schedule	Schedule I (Form 990) (2012)

Page 2 Schedule I (Form 990) (2012) AFT GUILD SDCCD C.O.P.E.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-					
- 2					
m					
4					
S					
9					
7					
Part IV Supplemental Information. Complete this part additional information.		provide the informa	tion required in Pa	rt I, line 2, Part III, coli	o provide the information required in Part I, line 2, Part III, column (b), and any other
		Y			
		! ! ! ! !	 		
			! ! ! ! ! ! !	 	1
	 		1 	, 	
		1 1 1 1 1 1 1 1			!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!

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Schedule I (Form 990) (2012)

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2012

Department of the Treasury Internal Revenue Service Name of the organization

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number

AFT GUILD SDCCD C.O.P.E.	91-2089978
FORM 990, PART VII, SECTION A - OFFICER COMPENSATION	
THE ORGANIZATION CURRENTLY DOES NOT HAVE ANY PAID STAFF. THE	OFFICERS ARE
COMPENSATED FROM THE DISTRICT.	
FORM 990, PART III, LINE 1 - ORGANIZATION MISSION	
THE AMERICAN FEDERATION OF TEACHERS GUILD IS AN OPEN, ACTIVE,	VITAL, MEMBER-DRIVEN
ORGANIZATION SERVING COLLEGE AND CONTINUING EDUCATION FACULTY	, CLASSIFIED STAFF, AND
MILITARY EDUCATION INSTRUCTORS IN THE SAN DIEGO COMMUNITY COL	LEGE DISTRICT, THE
COLLEGE FACULTY OF THE GROSSMONT-CUYAMACA COMMUNITY COLLEGE D	ISTRICT, AND THE
MILITARY EDUCATION INSTRUCTORS OF FLORIDA STATE COLLEGE.	
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
A DRAFT OF THE 990 IS PROVIDED TO ALL BOARD MEMBERS FOR REVIE	W AND APPROVAL.
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY	AVAILABLE
GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE UPO	ON REQUEST.
FORM 990, PART XII, LINE 1 - CHANGE OF ACCOUNTING METHOD	
THE 527 ORGANIZATION AFT GUILD SDCCD C.O.P.E MAINTAINS IT'S AGE THE ACCRUAL BASIS. THE TAX RETURN REFLECTS THE BOOK BASIS OF THE STATE	
	·····
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An Open, Active, Vital, Membership-Driven Organization

Officers

President Jim Mahler

Secretary Mary LeDuc (ECC)

Treasurer Lou Ann Gibson (Mesa)

appointed COPE Secretary Berta Harris (City)

appointed COPE Treasurer Lou Ann Gibson (Mesa)

appointed Grievance/Arbitration Officer Darrel Harrison (Miramar)

CLASSIFIED VICE-PRESIDENTS

FACULTY VICE-PRESIDENTS

		SDCCD College GCCCD College		ollege	
City	<u>Desiree</u> Van <u>Saanen</u>	City (contract)	<u>Kelly</u> <u>Mayhew</u>	Cuyamaca (contract)	Lyn Neylon
District	Christopher Rauch (DSC)	City (adjunct)	<u>Mark</u> <u>Linsky</u>	Cuyamaca (contract)	David Raney
Mesa	<u>Robin</u> Watkins	Mesa (contract)	<u>Guadalupe</u> <u>Gonzalez</u>	Cuyamaca (adjunct)	<u>Lisa</u> <u>Chaddock</u>
Miramar	<u>Edith</u> <u>Pollack</u>	Mesa (adjunct)VP	<u>Geoff</u> <u>Johnson</u> (Mesa)	Cuyamaca (adjunct)	<u>Ian Duckles</u>
Continuing Education	Diana Romero	Miramar (contract)	<u>Kevin</u> <u>Petti</u>	Grossmont (contract)	<u>David</u> <u>Mullen</u>
Communications	<u>Margaret</u> <u>Hodges</u> (Miramar)	Miramar (adjunct)	<u>Mark</u> <u>Anderson</u>	Grossmont (contract)	<u>Michael</u> <u>Golden</u>
	<u>Lynda</u>		<u>Jonathan</u>		

26	· ·		www aftg	uild org		
	Membership	<u>Carter</u> (City)	Public Relations	McLeod (Mesa)	Grossmont (adjunct)	Chris Klich
	Membership	<u>Tina</u> <u>Solorzano</u> (AFT Ofc.)	Communications	<u>Christie</u> <u>Allred</u> (Mesa)	Grossmont (adjunct)	<u>Greg</u> <u>Laskaris</u>
	Membership	<u>Deborah</u> <u>Quintanilla</u> (Mesa)	Membership	<u>Cassondra</u> <u>Caesar</u> (North City)	Communications	<u>Judd Curran</u> (Grossmont)
	Membership	<u>LaKeita</u> <u>Platts</u> (Mesa)	Membership	<u>Jennifer</u> <u>Cost</u> (Mesa)	Membership	<u>Lauren</u> <u>Halsted</u> (Cuyamaca)
	Political Action	Carlota Vidrio (Mesa)	Membership	Perla Vizcarra	Membership	<u>Denise</u> <u>Schulmeyer</u> (Grossmont)
	Political Action	Lucila Hernandez (WCC)	Political Action	Ann Hedekin (Mesa)	Membership	Alicia Muñoz (Cuyamaca)
	Political Action	<u>Cathy</u> <u>Springs</u> (Mesa)	Political Action	Jim Miller (City)	Political Action	Alicia Muñoz (Cuyamaca)
	Political Action	Augustine Sandovall (City)	Political Action	<u>Rick</u> <u>Cassar</u> (Miramar)	Political Action	<u>Lanssa</u> <u>Dorman</u> (Cuyamaca)
	Public Relations	Yvonne Schmeltz (City)	Political Action (Adj.)	<u>Abel</u> <u>Macias</u>	Political Action	<u>June Yang</u> (Grossmont)
					Public Relations	Vacant

	<u>Kathie</u> <u>Day</u> (Mesa)	C. City/Chavez(Adj)	vacant
	Jackie Townsend (Mesa)	C. City/Chavez (Cont)	vacant
Maintenance/Operations		ECC (adjunct)	<u>Greg Laskaris</u>
	Mike Norris (Mesa)	ECC (contract)	Esther Matthew

SDCCD Continuing Education

Food Service

	Robert Wilmer (City)	MCC (adjunct)	Jane Cranston
Non-Academic/Non- Classified		MCC (contract)	<u>Colleen</u> <u>Fitzmaurice</u>
	Donna Cecil (City)	NCC (contract)	Paul Richard
	(vacant) Mesa	NCC (Adjunct)	Elena Adams (ECC/MCC)
	(<i>vacant</i>) Miramar	WCC (adjunct)	Toni Fernandes
	(<i>vacant</i>) CE	WCC (contract)	Lee Blackmore
	(<i>vacant</i>) District		

Form **8868**

(Rev January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box • If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a

Do not complete Part II unless you have already been granted an automatic 3-month extention on a previously filed Form 8868.

request an e Associated	required to file Form 990-T), or an additional (no extension of time to file any of the forms listed in Part With Certain Personal Benefit Contracts, which milling of this form, visit www irs gov/efile and click	I or Part II would be sent	oth the exception of Form 8870, Information to the IRS in paper format (see instruct	Return for Transfers		
Part I	Automatic 3-Month Extension of Time	. Only sub	omit original (no copies needed).			
A corporation	on required to file Form 990-T and requesting an	automatic 6	-month extension — check this box and	complete Part I only	→ □	
All other co income tax	prporations (including 1120-C filers), partnerships, returns.	REMICs, ai	,	an extension of tim		
	Name of exempt organization or other filer, see instructions				Employer identification number (EIN) or	
Type or print	AFT GUILD SDCCD C.O.P.E.			91-2089978		
File by the due date for filing your return See instructions	Number, street, and room or suite number. If a P O. box, see instructions			Social security number (SSN)		
	330 ENCINITAS BLVD #101			ļ		
	City, town or post office, state, and ZIP code For a foreign address, see instructions					
	ENCINITAS, CA 92024					
Enter the R	eturn code for the return that this application is fo	or (file a sep	parate application for each return)		01	
Application Is For		Return Code	Application Is For			
Form 990 or Form 990-EZ		01	Form 990-T (corporation)			
Form 990-BL		02	Form 1041-A	m 1041-A		
Form 4720 (individual)		03	Form 4720		09	
Form 990-PF		04	Form 5227		10	
Form 990-T (section 401(a) or 408(a) trust)		05	Form 6069		11	
Form 990-T (trust other than above)		06	Form 8870		12	
Telephon If the or If this is check the external the external the content to the content	ension is for	isiness in the digit Group check this b	Exemption Number (GEN) If ox and attach a list with the nail	this is for the whole mes and EINs of all	9 1 7	
untıl The e ► [∑	est an automatic 3-month (6 months for a corporation 8/15, 20 13, to file the exempt orgonate in the organization's return for calendar year 20 12 or, 20, 20, and tax year entered in line 1 is for less than 12 months.	anization re , and endir	turn for the organization named above	al return		
3a if this	application is for Form 990-BL, 990-PF, 990-T, 4	720, or 6069	enter the tentative tax, less any			
nonrefundable credits See instructions b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.					0.	
c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions 3c \$					0. 0.	
	ou are going to make an electronic fund withdrawal w			· · · · · · · · · · · · · · · · · · ·	<u> </u>	